SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

т	he SPAC Instruction Guid	de explains how to complete this form.	1 Filer ID (Ethics Com N/A - local ballot		2 Total pages filed:
3	COMMITTEE NAME				OFFICE USE ONLY
	KEEP LEANDER CC	NNECTED			Date Received
4	COMMITTEE ADDRESS Change of Address	Control of the Contro	ΓΥ; STATE; eander Texas	ZIP CODE 78641	04.07.2022 Derabtree
		Mo / MDo / MD		MI	Date Hand-delivered or Date Postmarked
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST James		мI К	Receipt # Amount \$
	NAME	Mr		SUFFIX	Date Processed
		Larsen			Date Imaged
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUI	TE #; CITY;	STATE;	ZIP CODE
	TREASURER STREET ADDRESS (Residence or Business)	840 Hillrose Drive	Leander	Texas	78641
7	CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUI 840 Hillrose Drive	TE #; CITY; Leander	STATE; Texas	ZIP CODE 78641
	Change of Address				
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 942-7266	EXTENSIO	N	
9	REPORT TYPE	July 15 8	Oth day before election th day before election unoff		Exceeded Modified Reporting Limit Dissolution Report (Attached PAC-FR) 10th day after campaign treasurer termination
10	PERIOD	Month Day Year			Month Day Year
	COVERED	03 / 07 / 2022	THROUGH		04 / 07 / 2022
11	ELECTION	ELECTION DATE		ECTION TYPE	
		Month Day Year Primary 5 7 2022 General	Runoff X Special		ther Ballot proposition A Description————————————————————————————————————
		GO TO P	AGE 2		

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID (Ethics Commission Filers)							
14 COMMITTEE		EP LEANDER CONNE	CANDIDATE/OFFICEHOLDER NAME	N/A-local filing				
14 COMMITTEE PURPOSE (Attach lists on plain paper	to	CANDIDATE						
complete this report if necessary.)		OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)					
x SUPPORT (Candidate or Measure)		BALLOTIDENTIFICATION / #	ELECTION DATE onth Day Year				
OPPOSE (Candidate or Measure	.			05 / 07 / 2022				
ASSIST (Officeholder)	'	x MEASURE	DESCRIPTION Cap Metro Continuation: Vote to stay in ma	ay! Vote Yes on Prop. A to continue connected	:d!			
15 CONTRIBUTION TOTALS	1.	PLEDGES, LOANS, OF	POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR DE ELECTRONICALLY)	\$				
	2.	TOTAL POLITICAL O	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	\$ 1683.29				
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED F	POLITICAL EXPENDITURES	\$				
TOTALS	4.	TOTAL POLITICAL E	\$					
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CON OF THE REPORTING F	NTRIBUTIONS MAINTAINED AS OF THE LAST PERIOD	T DAY \$				
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AM LAST DAY OF THE RE	OUNT OF ALL OUTSTANDING LOANS AS OF PORTING PERIOD	THE \$				
	nclude	es all information requi	nalty of perjury, that the accompanying ired to be reported by me under Title 15					
1 3 Com	(1) Affidavit							
Sworn to and subscribe	ed be	fore me, by the said	lames Larsen	, this the				
day of APEI	_, 20	to certify whi	ich, witness my hand and seal of office.	De Int Correta	מה			
Signature of officer admir	nisterir	ng oath Printed r	name of officer administering oath	Title of officer administering oat	th			
PART TO A THE ST		光光连续的	OR					
(2) Unsworn Declaration								
			, and my date of birth is _		-1			
My address is		(street)	(city)	(state) (zip code)(country)				
Executed in		County, State of	, on the day of (mon					
			Signature of Car	mpaign Treasurer (Declarant)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

		,							
Th	e Instruction Guide explains	s how to complet	e this for	n.		1	Total pages Sched	ule A2	
2 FILER NAME	E KEEP LEANDER CONNE	CTED				3	Filer ID (Ethics Co	•	
4 TOTAL O	F UNITEMIZED IN-KINI	O POLITICAL (CONTRI	BUTIO	NS	\$	\$1,683.29		
5 Date	6 Full name of contributor James Kay Larsen	Leander resident)		8 Amount of Contribution \$		9 In-kind contrib description	ution		
04/07/2022	7 Contributor address;	City,	State,	Zıp Cod	\$1169.10 Code			Yard-signs - Vote Yes on Prop. A.	
	840 Hillrose Drive	Leander	TX	7864	1		Check if travel outsi	l de of Texas Complete	Schedule T
10 Principal occ	upation / Job title (FOR NON-	IUDICIAL)(See Ins	11 Er	πploye	ployer (FOR NON-JUDICIAL)(See Instructions)				
Attorney			Ogletree Deakins						
12 Contributor's	principal occupation (FOR JUI	DICIAL)		13 C	ontribu	itor	's job title (FOR JU	DICIAL) (See Instru	uctions)
14 Contributor's	employer/law firm (FOR JUDIO	CIAL)	., **	15 La	aw firm	n of	contributor's spou	se (if any) (FOR JL	JDICIAL)
16 If contributor	is a child, law firm of parent(s)	(if any) (FOR JUD	DICIAL)						
Date	Full name of contributor Cassie Miner Larsen	out-of-state PAC	(ID# <u>N/A - L</u>	eander resid	dent_)		Amount of Contribution \$	l In-kind contrib description	ution
04/05/2022	Contributor address;	City;	State;	Zip Co	de		\$514.19	Yard signs - Vo	te Yes on
	840 Hillrose Drive	Leander	TX	78	3641		Check if travel outsi	I de of Texas Complete	Schedule T
Principal occ	upation / Job title (FOR NON-	IUDICIAL) (See Ins	structions)	Er	nploye	er (FOR NON-JUDICI	AL)(See Instruction	ıs)
Music Edu	cator			Rock Enrichment Academy					
Contributor's	principal occupation (FOR JU	DICIAL)		C	ontribu	utor	's job title (FOR JU	DICIAL) (See Instri	uctions)
Contributor's	employer/law firm (FOR JUDIO	CIAL)	<u>.</u> .	Lá	aw firm	n of	contributor's spou	se (if any) (FOR JU	JDICIAL)
If contributor	is a child, law firm of parent(s)	(if any) (FOR JUD	DICIAL)						
			т.						
							_		
							•		
	ATTACH	ADDITIONAL CO	PIES OF 1	THIS SC	HEDL	JLE	AS NEEDED	-	
	If contributor is out-of-state	PAC, please se	e Instruct	ion guid	de for	ad	ditional reporting	g requirements.	

SUBTOTALS-SPAC

FORM SPAC COVER SHEET PG 3

17	COMMITTEE NAME KEEP LEANDER CONNECTED	18 Filer ID (Ethics Con	
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	N/A - Local Ballot Me	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 1,683 29
3.	× SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ \$5,000
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR L	ABOR ORGANIZATION	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORI ORGANIZATION	PORATION OR LABOR	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABO	OR ORGANIZATION	\$
7.	SCHEDULE E: LOANS		\$
8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	···	\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12.	SCHEDULE H. PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	A BUSINESS OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	NS RETURNED	\$

PLEDGED CONTRIBUTIONS

SCHEDULE B

If the requested information is not applicable, DO NOT include this page in the report.

The	Instruction Guide explain	ns how to complete this	form.	1 Total pages Sched	ule B		
2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	KEEP LEANDER	CONNECTED		N/A LOCAL B	ALLOT MEASURES		
4 TOTAL OF	UNITEMIZED PLED	GES		\$ \$5,000			
5 Date	6 Full name of pledgor	out-of-state PAC (ID#_N	/A - Leander resident)	8 Amount of Pledge \$	9 In-kind contribution description		
04/07/2022	James Kay Larsen				I N/A - monetary		
	7 Pledgor address,	City, Sta	ite; Zip Code	2,500	I		
	840 Hillrose Drive	Leander 1	TX 78641	Check if travel outs	I. side of Texas Complete Schedule T		
10 Principal occu	pation / Job title (See Instru	uctions)	11 Employer (See	Instructions)			
Date	Full name of pledgor	out-of-state PAC (ID#	N/A - Leander resident	Amount of Pledge \$	I In-kind contribution I description		
04/07/2022	Cassie Minert Larsen				N/A - monetary		
3 110112322	Pledgor address,		ate; Zıp Code	\$2,500	 -		
	840 Hillrose Drive	Leander T	X 78641	Check if travel outs	I. side of Texas Complete Schedule T		
Principal occup	pation / Job title (See Instru	ctions)	Employer (See	Instructions)			
	T				1		
Date	Full name of pledgor	out-of-state PAC (ID#)	Amount of Pledge \$	In-kind contribution description		
					İ		
	Pledgor address,		ate, Zıp Code		!		
				Check if travel outs	I side of Texas Complete Schedule T		
Principal occu	pation / Job title (See Instru	ıctions)	Employer (See				
Principal occu	pation / Job title (See Instru	ictions)	Employer (See				
Principal occu	pation / Job title (See Instru Full name of pledgor	uctions)			In-kind contribution description		
	Full name of pledgor	out-of-state PAC (ID#)	Amount of			
	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `)	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address,	□ out-of-state PAC (ID# City; State	; Zıp Code	Amount of Pledge \$			
Date	Full name of pledgor	□ out-of-state PAC (ID# City; State)	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address,	□ out-of-state PAC (ID# City; State	; Zıp Code	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address,	□ out-of-state PAC (ID# City; State	; Zıp Code	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address,	□ out-of-state PAC (ID# City; State	; Zıp Code	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address,	□ out-of-state PAC (ID# City; State	; Zıp Code	Amount of Pledge \$	l description		
Date	Full name of pledgor Pledgor address, pation / Job title (See Instru	□ out-of-state PAC (ID# City; State	; Zıp Code Employer (See	Amount of Pledge \$	l description		